

CHISLEHURST
URBAN DISTRICT COUNCIL.

ANNUAL REPORT

ON THE

HEALTH

OF THE

Urban District of Chislehurst,

IN THE YEAR

1904,

BY

JAMES SCOTT TEW, M.D., D.P.H.

CHISLEHURST:

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1905.

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IN THE YEAR 1904.

Constitution, Area and Population.—By Local Government Board Order, No. 40,686 which came into operation on 1st April, 1900, the Civil Parish of Chislehurst was constituted an Urban District.

The following tables give details of the area, number of houses, and census population :

Area, Population, and Number of Houses according to 1901 Census.

AREA IN STATUTE ACRES.		INHABITED HOUSES.			POPULATION.		
		Census of			Census of		
Land and Inland Water.	Inland Water only.	1881	1891	1901	1881	1891	1901
2791	5	941	1155	1403	5391	6557	7429

WARDS.	HOUSES, 1901.				POPULATION, 1901.		
	In-habited.	Uninhabited.		Build-ing.	Persons	Males.	Fe-males.
		*In Occupation.	Not in Occupation.				
Lower Chislehurst	450	5	15	17	2314	1020	1294
Upper Chislehurst	953	12	11	18	5115	2195	2920

* "Uninhabited houses in occupation" means that the houses were in general occupation for business or other purposes, but no one resident on night of census.

The **Population** of the District, as estimated to the middle of 1904 was 7,736, *i.e.*, an increase of 307 on the census population of 1901, and of 96 on the estimated population of 1903.

The number of registered births amounted to 181, including 99 of males and 82 of females, and giving a **Birth-rate** of **23.3** per 1,000 of population.

Sixty deaths were returned, consisting of 31 of males and 29 of females. To these must be added 12 deaths of residents which occurred outside the District, *viz.*, at the Bromley Union Workhouse, making a total of 72 deaths.

The **Death-rate** was **9.3** per 1,000 of population as compared with 10.4 in the previous year.

The principal epidemic diseases, which include Small-pox, Measles, Scarlet Fever, Diphtheria, Whooping-cough, Fever, and Diarrhœa, produced 3 deaths, *viz.*: 2 from Diarrhœa, and 1 from Enteric Fever.

The **Epidemic Disease Death-rate** was only **0.3** per 1,000 of population as compared with 0.7 in the previous year.

The **Infant Mortality** (the number of deaths of infants under 1 year of age per 1,000 registered births) was **82** against 100 in the previous year.

During the year 1904 the birth-rate throughout England and Wales taken as a whole was 27.9 (which is the lowest rate on record); the

general death-rate was 16.2, and the general epidemic disease death-rate 1.94 per 1,000 of population; and the rate of mortality amongst infants under 1 year of age per 1,000 registered births was 146.

It will be seen from the above figures that the vital statistics are of an exceptionally satisfactory character, the general death-rate epidemic disease death-rate, and infant mortality being respectively 6.9, 1.64 and 64 below those of the country generally.

The general death-rate is the lowest yet recorded for the District and it is not reasonable to suppose that nearly so low a rate can be regularly maintained.

Notifiable Diseases.

The diseases notifiable under the Infectious Disease (Notification) Acts, 1889 and 1899, are :—Small-pox, Cholera, Diphtheria, Membranous Croup, Erysipelas, the disease known as Scarlatina or Scarlet Fever, and the Fevers known by any of the following names: Typhus, Typhoid (Enteric), Relapsing, continued and Puerperal, and also any infectious disease to which the Act has been applied by Local Authority in manner provided by the Act. At the present time no further diseases are included.

Seventy-five cases of infectious disease were notified during the year as compared with 68 in 1903, and consisted of 6 of Diphtheria, 57 of Scarlet Fever, 2 of Enteric Fever, and 10 of Erysipelas.

The District was entirely free from **Small-pox** throughout the year.

Diphtheria fell from 17 cases with 1 death in 1903 to 6 non-fatal cases in 1904. They occurred: 1 in January, 1 in March, 2 in April, 1 in May, and 1 in December, the District being free from the disease during the remaining seven months of the year.

Locally they occurred :—1 at Sidcup Green; 1 at Carlton Road, Sidcup; 3 at Lubbock Road; and 1 at Crown Lane, Chislehurst; and arose at the following periods of life:

under 1 year.	1—5 years.	5—15 years.	
<hr/> 1	<hr/> 1	<hr/> 4	= 6 cases.

Two patients were removed to the Bromley and Beckenham Joint Hospital.

Three of the cases arose from direct importation into the District, *i.e.*, one came with the disease and two other children contracted it from the initial case.

Scarlet Fever produced 57 non-fatal cases as against 23 in the previous year. They occurred: 7 in January, 5 in February, 1 in May, 1 in August, 6 in September, 7 in October, 21 in November, and 9 in December, the District being free from the disease during the months of March, April, June and July. The cases arose locally: 1 at Royal Parade; 2 at High Street; 2 at Wesleyan School House; 3 at Belmont Road; 5 at Green Lane; 2 at Camden Grove; 1 at Willow Grove; 1 at Lubbock Road; 1 at Park Road; 3 at Perry Street; 1 at White Horse Hill; 1 at Froggnal Stables, Foots Cray; 3 at Cray Road, Foots Cray; 4 at Crown Lane; 1 at St. Michael's Orphanage; 5 at Holbrook Lane; 1 at Church Lane; 2 at Tudor Cottages, Foots Cray; 4 at Windsor Road, Foots Cray; 4 at Mayfield Cottages, Foots Cray; 1 at "Hawthorns," Chislehurst; 2 at Gothic Cottages, Foots Cray; 1 at Nelson Place, Sidcup; 2 at Suffolk Road, Foots Cray; 2 at Garden Cottages, Foots Cray; 1 at Rectory Garden Cottages, Chislehurst; and 1 at Nash's Cottages, Foots Cray.

The cases arose at the following age-periods:—

<u>under 1</u> <u>year.</u>	<u>1—5</u> <u>years.</u>	<u>5—15</u> <u>years.</u>	<u>15—25</u> <u>years.</u>	<u>25—65</u> <u>years.</u>	
1	17	34	3	2	= 57 cases.

Although no actual deaths have taken place from Scarlet Fever, yet the disease has been a source of considerable trouble and anxiety to your officers throughout the year.

At least five cases were "return" cases from the Bromley and Beckenham Joint Hospital, *i.e.*, the disease was without reasonable doubt in these five cases contracted from patients who had been treated for Scarlet Fever in the hospital and had been discharged and returned home. Three patients were found to be in an infectious state at varying times after leaving the hospital and were sent back. One

patient who showed signs of the disease after discharge was isolated at home.

Many parents appeared to take no trouble to find out what was the matter with their children and often did not call in a doctor, and allowed them to continue to attend school.

My Reports to your Council during the year have referred in detail to these matters and those of January 28th, February 2nd, and November 22nd, are appended to this report.

The Sanitary Inspector, Mr. Powell, who had been engaged in visiting at infected houses, superintending removal of patients to hospital, disinfecting, &c., unfortunately contracted the disease in a somewhat severe form, and went to the hospital on December 11th. Three children—members of his family—also took it and were in hospital at the end of the year, while several others were showing signs of failing with the same disease.

In addition to the ordinary means of prevention, disinfection, &c., the routine of which I have several times described, I have drawn out a card for distribution containing a few simple recommendations and cautions. A copy of this is appended.

Enteric (or Typhoid) Fever.

Two cases, one of which proved fatal, occurred as against 1 non-fatal case in 1903. They arose: 1 in August at Suffolk Road, Foots Cray; and 1 in November, near the Common, Chislehurst; the patients in both cases being young adult males.

Erysipelas.

Ten non-fatal cases were reported—as compared with 12 in 1903; 1 in January and June, 2 in August, 3 in October, 1 in November and 2 in December, and arose at the following age-periods:—

<u>under 1</u> <u>year.</u>	<u>1—5</u> <u>years.</u>	<u>5—15</u> <u>years.</u>	<u>15—25</u> <u>years.</u>	<u>25—65</u> <u>years.</u>	<u>65 and</u> <u>upwards.</u>
1	1	1	1	5	1 = 10 cases.

They occurred in the following places:—Albany Road, Lubbock Road, Summerhill Villas, White Horse Hill, Green Lane, and Frogna! Villas.

Non-notifiable Diseases.

Diarrhœa caused two deaths: 1 at Perry Street, in August, and 1

at Park Road, in September; both being infants under 1 year of age.

No deaths resulted from **Measles, Whooping-cough, or Influenza.**

Hospital Isolation.

During the year 1904, 54 cases of infectious disease were removed to and treated at the Bromley and Beckenham Joint Isolation Hospital, and were admitted as follows :—

January	7 cases	(1 Diphtheria, 6 Scarlet Fever.)
February	4 „	(Scarlet Fever.)
August	1 „	(Scarlet Fever.)
September	6 „	(Scarlet Fever.)
October	7 „	(Scarlet Fever.)
November	19 „	(Scarlet Fever.)
December	10 „	(1 Diphtheria, 9 Scarlet Fever.)
<hr/>		
Total	54 cases	(2 Diphtheria, 52 Scarlet Fever.)
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Inspections.

In addition to an abnormal number of inspections on account of the prevalence of Scarlet Fever, a house to house inspection of 35 premises at Foots Cray was undertaken by me with the Sanitary Inspector, principally with regard to drainage, but also connected with other matters of general sanitation.

There are no **Common Lodging Houses** in the District.

Dairies, Cowsheds and Milkshops.

The Regulations made under the Dairies, Cowsheds and Milkshops Orders were amended and re-adopted on June 8th, 1903 and came into force on the 12th August of that year.

These premises have all been inspected by me during the year and are in a satisfactory condition.

Slaughter-houses.

Bye-laws as to the regulation of Slaughter-houses were adopted by the Council on October 7th, 1901, and were confirmed by the Local Government Board on the 30th December of the same year.

Factory and Workshop Act, 1901.

The provisions of the Act have been administered in a very

thorough manner. I have examined the Register and made visits of inspection with the officer deputed to carry out the provisions of the Act in numerous cases where any difficulty arose or advice was required.

Mr. Powell's detailed Report is appended and also the table recently issued by the Home Office.

Refuse Removal is so far carried out by contract, but suggestions have recently been made and are under consideration that this work should be done by the Council's own men under the direct supervision of one of their own officers, and it is hoped that the scheme will be ready for working by next year.

Excretal Removal is practically all effected by water carriage into the West Kent Main Sewer. Some few dry systems exist but only on large premises where the contents are retained for use on the land, or in some few places where the gradients will not allow of connection with the sewers.

Drainage.

A sewer has been made along Walden Road so that it will now be possible to get rid of cesspool overflows which have been complained of from time to time.

Water Supply.

The supplies are practically all from the Metropolitan Water Board. Some few pumps are in use for garden purposes, but none are known to be in use for drinking purposes the water from which is not above suspicion, and these are very few in number.

Mortuary.

There is a small Mortuary situate close to the Parish Church of St. Nicholas, which is in a central position of the parish.

Elementary School Closures.

It was considered necessary to advise the closure of the National School, Chislehurst, from October 7th to October 28th, and from November 14th to December 9th (all inclusive) on account of the prevalence of Scarlet Fever.

Adoptive Acts.

The Infectious Disease Prevention Act, adopted July 2nd, 1900 ;

and the Public Health Act Amendment Act, adopted December 10th, 1900, are in force in this District.

Midwives Act, 1902.

The preliminary action taken by this Council was detailed in my last year's Annual Report. It should be borne in mind that up to March 31st, 1905, midwives in *bonâ fide* practice for a year before July 31st, 1902, can be admitted on the roll of certified midwives without examination; that after that date uncertified midwives cannot call themselves or in any way imply that they are certified midwives under a maximum penalty of £5; and that after April 1st, 1910, uncertified midwives must not practice under a maximum penalty of £10.

This Council has made a provisional arrangement with the Medical Officer of Health by which the inspection of the certified midwives, their appliances, and registers is assured.

A local register has been prepared and generally the preliminaries for the enforcement of the provisions of the Act have been arranged in a very thorough manner.

The **Bye-laws** at present in force are the same as those in the Bromley Rural District.

The question of adopting others is under consideration.

Voluntary Notification of Tuberculosis.

As the voluntary notification of this disease, with disinfection, in many cases has been useful in neighbouring districts, the following letter dated November 19th, 1904, was addressed by me to your Council on the subject:—

“Several surrounding districts have, with a view of attempting
“to diminish the prevalence of pulmonary consumption, adopted
“the voluntary notification of this disease.

“I have advised this *voluntary* system of notification on the
“grounds that it allows of some useful work being done without
“incurring undesirable responsibilities which might arise under a
“compulsory system. If you see fit to adopt this I propose
“addressing a circular letter (somewhat as enclosed draft) to each
“medical man practicing in the District and providing separate
“notification certificate forms.”

"It would be advisable to obtain the consent of the Local Government Board if you adopt my proposal."

The matter at the end of the year was receiving the attention of the Health Committee.

The condition of the District at the end of the year was satisfactory; the continued succession of cases of Scarlet Fever which was so marked in November and part of December showed signs of abatement towards the close of the year.

Mr. Powell's Report of the Sanitary work carried out by him during the year, the statistical tables required by the Local Government Board, and the table provided by the Secretary of State for recording action taken under the Factory and Workshop Act, 1901, are appended.

I have the honour to be, Gentlemen,

Your obedient Servant,

JAMES SCOTT TEW.

March 20th, 1905.

January 28th, 1904.

CHISLEHURST URBAN DISTRICT COUNCIL.

Scarlet Fever—Return Cases.

GENTLEMEN,

I beg to lay before you the following facts relating to the above:—

On the 21st of November last a boy named E. L. S., aged 4 years, of Belmont Road, Chislehurst, was notified as suffering from Scarlet Fever, and removed on the same day to the Bromley and Beckenham Joint Hospital.

The usual disinfection was carried out, and the room cleansed.

On December 26th, Mrs. S., the mother of the boy, became ill (not of infectious disease) and was removed to the Cray Valley Hospital to undergo an operation, making an arrangement with Mrs. P., a neighbour at an adjoining house, to receive the boy in her absence when he would be discharged from the Joint Hospital.

On January 18th, 1904, the father fetched the boy from the Joint Hospital in a cab, and took him straight to Mrs. P.'s house. On arrival the boy appeared to have a cold and slight nasal discharge, and his ears appeared to be still scaly.

The boy is said to have always suffered somewhat from a nasal discharge, so no notice was taken of this.

On January 20th, Dr. Allan examined the boy and informed Mr. Powell that he was still peeling.

On January 23rd (five days after return from Hospital of the boy E. L. S.) H. P., aged $4\frac{1}{2}$ years, in the same house, was notified as suffering from Scarlet Fever, and on the 25th (seven days after the return of E. L. S.) E. C., a lodger at Mrs. P.'s, also contracted the disease.

I had an interview with Dr. Allan and examined the boy myself on Monday, the 25th inst., when I noticed a considerable nasal discharge, a roughness round the ears and a branny condition of the front of the legs,—the nasal discharge to my mind being the worst feature. I believe in this case the boy went into the Hospital with a chronic nasal discharge, which naturally would become specifically infected with the disease, and would remain so for a very considerable time. I may say that this view with regard to infection is not an opinion only, but is supported by observed facts, and is shared by many who have specially gone into the matter of long continued infection.

A second return case also occurred, but as it was not examined by a medical man until eight days after discharge, it is not so clear as the previous one. The facts are, however, as follows:—

N. M., aged 3 years, was notified on 14th November last as suffering from Scarlet Fever, and removed to Hospital the same day, and remained under treatment until discharged on 13th January, 1904, when a sister and the mother went to the Hospital and brought the child home in a cab. The night after the child returned home it complained of earache, and a discharge of matter from the ear took place, which lasted for two days—and possibly more—but this was the time noticed by the parents. On the 21st January this sister, D. M., aged 14, was notified as suffering from Scarlet Fever.

It will be noted that during the periods—in the first case from November 21st, 1903, to January 18th, 1904, and in the second case from November 14th, 1903, to January 13th, 1904,—no cases of Scarlet Fever arose at the homes, although in both cases there were children in the houses of susceptible age, and who had never had Scarlet Fever.

The Inference to be drawn is that it is absolutely necessary that any discharge—and particularly if from the nose and ear—should be treated and cured during the time they are regarded as convalescents at the Hospital prior to returning home.

On the evening of the 27th inst., I received a wire and a communication following from Mr. Powell that H. D., aged 3 years, who went to the Hospital on November 9th suffering from Scarlet Fever, was discharged on the 27th January, and on its return had been seen by Dr. Allan, who considered that it was in an unsatisfactory condition, having a discharge from the nose and remains of peeling still visible. I saw the child with Dr. Allan on the morning of the 28th, and concurred in his opinion that it was unsafe to remain at home, and should be returned to hospital, as isolation was impossible in the small house with a large family.

The occurrence of return cases of this kind is not only troublesome and expensive, but naturally destroys the confidence of the public in Hospital isolation.

I have the honour to be, Gentlemen,

Yours faithfully,

J. S. TEW.

February 2nd, 1904.

CHISLEHURST URBAN DISTRICT COUNCIL.

Scarlet Fever—Return Cases.

GENTLEMEN,

I have to report to your Council still another return case of Scarlet Fever,—the history is as follows :—

W. L. B., aged 6 years, was notified as suffering from Scarlet Fever on October 28th, 1903, and removed to the Bromley and Beckenham Joint Hospital on that day, and remained until his discharge on January 13th, 1904,—the prolonged length of the stay being due to the fact that he had suffered from nasal discharge and bad fingers.

The mother states that on discharge the child appeared to have a bad cold, and the insides of his nostrils were red. She also states that she put him to sleep in a bed in her own room, separated from the other two children, and washed him with water containing Condy's Fluid, and also mopped out his mouth and nose with the same solution regularly, applied cold cream, and kept him apart from the other children as much as possible.

On Monday, 25th January, a pocket handkerchief used by the patient was, by accident, used afterwards by the other two children, and on February 1st the sister, K. B., was notified by Dr. Tallent as suffering from Scarlet Fever.

The other inmates, exclusive of the father and mother, are :—
T. B., aged 3 years, who had Scarlet Fever sixteen months ago, and
H. S., aged 19, a lodger—whose condition as to whether or not he has had Scarlet Fever is doubtful.

I met Dr. Tallent on the 2nd inst, and examined the child who had a considerable discharge from the nose, and whitlows on the fingers, and agreed with Dr. Tallent that he should return to the Hospital, as it was, I think, very clear that he was the source of contagion.

In this case the mother took great pains in swabbing, washing, and isolating the child—more than usually is or can be taken—so that it is more than possible that these precautions were effective, until the pocket handkerchief was used by the other children on the 25th—the incubation period of Scarlet Fever being usually three to five days. The process of skin peeling was quite completed.

I have the honour to be, Gentlemen,

Your obedient Servant,

J. S. TEW.

November 22nd, 1904.

CHISLEHURST URBAN DISTRICT COUNCIL.

Scarlet Fever.

GENTLEMEN,

I regret to report that cases of Scarlet Fever continue to occur, and the disease is now most prevalent in the Fooks Cray District.

I found it necessary to recommend the further closure of the National School from November 14th to November 25th, and this closure should, I think, be extended again for another fortnight.

On the 14th inst I visited over a dozen houses where children were absent from School. One child I found in bed with the rash out; a doctor was called in and she was removed same day. Others were in a suspicious state, and some have since developed the disease. On the 16th I visited a further number of houses, and examined many of the children at the Chislehurst and Fooks Cray School, and from what I saw then and on the 14th I recommended the closure of this School from the 16th November to December 2nd. Several children had undoubtedly attended school in an infectious state.

There appears to be several factors at work tending to its existence and spread. The disease is now generally of a mild type, the rash, in some cases, only being out for a few hours and the parents allege that they do not know that it is a Scarlet Fever rash,—in some cases this is a genuine assertion, in other cases I can hardly imagine that it is. Frequently a doctor is not called in and nothing further is noticed until peeling occurs, the child meanwhile possibly having attended school.

One person admitted that the child had had "Scarlatina," but had no idea that it was the same disease as Scarlet Fever.

The children at the Chislehurst and Fooks Cray School appear to be very thick on the ground, even with a diminished attendance, and I have little doubt that the school is considerably overcrowded in normal times.

If parents, or those having the care of children, endanger the public in this way and infect the schools and retard the progress in the education of other children, I think your Council will be well advised to set the law in motion against them.

If before taking such action you think it advisable to further bring the responsibilities home to them, I would suggest that I draw up a few short and simple recommendations—somewhat of the kind I

some time ago got out during the prevalence of Diphtheria—and have them distributed.

The relatives of patients removed to Hospital appear to have some difficulty in gaining information as to the patients condition, as many cases are a good way off and the telephonic communication is very limited; I therefore addressed the appended letter to the Secretary on the matter.

I have the honour to be, Gentlemen,

Your obedient Servant,

J. S. TEW.

November 27th, 1904.

F. H. GEDNEY, Esq.,
Park House,
Bromley, Kent.

DEAR SIR,

I have had several requests from the parents of children who are patients in the Bromley and Beckenham Joint Hospital, that they might be informed as to their condition. There is no public telephonic communication to Chislehurst and often none near in other parts.

If the parents could have a postcard, say twice a week during the first week of removal, they would I am sure be very grateful, as it is during that period that they are specially anxious.

Will you kindly ask the Committee if they would be good enough to give the matter their consideration?

Yours faithfully,

J. S. TEW.

CHISLEHURST URBAN DISTRICT COUNCIL.

SCARLET FEVER OR SCARLATINA.

It is the duty of the Head of the Family, the nearest relative in the house, or the occupier to notify or cause to be notified to the Medical Officer of Health, c/o Mr. W. G. POWELL, COUNCIL OFFICES, CHURCH ROW, CHISLEHURST, the occurrence of any case of **SCARLET FEVER, SCARLATINA**, or any other of the infectious diseases specified below.

Penalties up to £20 can be imposed under the following circumstances :—

Failing after notice properly to disinfect any room or house; for entering a public conveyance while suffering from an infectious disease (such as scarlet fever or scarlatina) without informing the owner; for exposing an infectious person in a public place or conveyance: for giving, lending, selling, or moving any infected article without disinfection; for letting any room or premises without disinfection; for making false statements as to there being or having been six weeks previously an infected person in premises to let; FOR FAILING TO GIVE NOTICE of the existence of a case of any of the infectious diseases mentioned below.

Note.—The early symptoms of Scarlet Fever (which is the same disease as Scarlatina) or Scarlatina are sickness, headache, feverishness with dry hot skin and sore throat, followed in a few hours by a red rash, particularly on the chest. Later on peeling of the skin and of the hands and feet occurs.

In the case of any such symptoms appearing the advice of a doctor should immediately be sought by the head of the family, the nearest relative, or the occupier.

THE FOLLOWING ARE THE DISEASES REQUIRING TO BE NOTIFIED, viz.:

Small Pox, Cholera, Diphtheria, Membranous Croup, Erysipelas, the disease known as Scarlatina or Scarlet Fever, and the Fevers known by the following names: Typhus, Typhoid, Enteric, Relapsing, Continued or Puerperal.

By Order,

JAMES F. BOWEN,

Council Offices,

Clerk of the Council.

December, 1904

CHISLEHURST URBAN DISTRICT COUNCIL.

15th March, 1905.

TO THE CHAIRMAN AND MEMBERS OF THE

CHISLEHURST URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have the honour to present to you my Annual Report for the year 1904.

The number of visits and re-visits paid to premises have been 557, and 59 nuisances were discovered.

Complaints. Ten complaints were received and investigated. Of these 3 related to accumulation of house refuse, 2 to smells from sewer gratings, 3 to defective drainage, 1 to offensive accumulations, and 1 to animals kept in such a state as to be a nuisance. The complaints are 14 less than the previous year.

Infectious Disease. Seventy-five cases of Infectious Disease were dealt with, viz:—57 cases of Scarlet Fever, 6 Cases of Diphtheria, 10 cases of Erysipelas, and 2 cases of Enteric Fever. This is an increase of 7 cases on the year 1903. It was found necessary to remove 54 cases to the Isolation Hospital, Bromley Common.

Forty-five houses, or parts of houses, were fumigated, and I am glad to say the owners readily assisted by cleansing the rooms as soon as possible. The fumigation was carried out with liquified Sulphur Dioxide, the clothing etc., being disinfected with a solution of Izal. The rooms were also sprayed with an Equifex or Mackenzie spray pump—Formic Aldehyde as a 2% solution being used for this purpose. One room was dealt with in a similar manner after a fatal case of Tuberculosis.

Drainage and Drain Testing. The drains of 6 premises were examined and tested, 5 of which were found defective and re-constructed.

Insufficient Water-closets. Water for flushing purposes was laid on to 4 premises.

Insufficient Ash-pits. Eleven houses have been provided with movable receptacles.

Slaughterhouses, Bakehouses, Cowsheds, Milkshops and Dairies. The Slaughterhouses have been regularly inspected, and visits have been frequently made to Bakehouses, Cowsheds, etc.

During the past year two cow-keepers gave up their business, and their premises are now vacant.

One purveyor of milk and one milk seller have been registered.

Overcrowding. Several cases have again been reported and dealt with. There are a good few vacant houses, but the rents are so high that it prevents the poorer people taking them, and thus the small houses become more and more overcrowded every year.

Temporary Shelters. The temporary shelters for fruit-pickers have been regularly visited, and the accommodation for these people is still not all that can be desired. Four old huts were demolished and four new ones erected.

Factory and Workshop Act, 1901. Ninety-five visits and re-visits have been paid to the Workshops. They have been kept generally in good condition. Delay occurs by reason of the occupiers not carrying out the limewashing and cleansing at the proper time, but in no case was it found necessary to serve a legal notice.

One case of overcrowding was dealt with.

There are six less Workshops than at the end of 1903, viz.:— 3 dressmakers, 2 carpenters and joiners, and 1 basket maker.

No new ones were added to the register, and the corrected list is as follows :—

Dressmaking	...	...	...	...	...	5
Basket makers	...	...	...	...	...	1
Carpenters and Joiners	...	...	...	...	...	3
Farriers and Wheelwrights	...	...	...	...	...	5
Tailors	...	...	...	...	...	2
Upholsterers...	...	...	...	...	...	3
Saddlers	...	...	...	...	...	2
Bootmakers	...	...	...	...	...	3
Carriage Builders	...	...	...	...	...	2
Cycle Maker	...	...	...	...	...	1
Plumbers	...	...	...	...	...	4
Laundries	...	...	...	...	...	2
Bakers	...	...	...	...	...	7
Total						<hr/> 40

The Sanitary conveniences at the Factories have been inspected and the same number exists as last year, viz. :—

Brickmakers...	...	...	...	...	...	2
Printers	...	...	...	...	...	2
Mineral Water Works	...	...	...	...	...	1
Electric Light Works	...	...	...	...	...	1
Cycle Maker...	...	...	...	...	...	1
Total						<hr/> 7

Petroleum Acts, 1871 to 1881. The position of Inspector under these Acts has been added to my other duties during the past year. There are 4 persons licensed, one of which was a new license granted during the year. One storage was found unsuitable and a new one was substituted.

Summary of Work Done,

Number of complaints received and investigated	10
Nuisances discovered	59
Nuisances abated without report	52
Nuisances abated after report	1
Legal Notices served	1
Preliminary Notices served	2
Notices served for insufficient Ash-pits	—
Notices served for insufficient Water closets	—
Number of Letters written, Reports made, School Notices, etc., and other minor Notices	414

Character of Work Done.

Houses cleansed and generally repaired	11
Cowsheds, Slaughter-houses, and Bakehouses cleansed ..	24
Overcrowding abated	2
Defective Roofs and Gutters Repaired	5
Bell Traps abolished and Gully Traps substituted ...	2
Dust-bins provided	11
Water laid on to Water closets	5
Cesspools cleansed	3
Cesspools abolished	2
Houses at which Drains were Tested and Examined ...	6
Houses at which Drains were found Defective	5
Houses at which Drains were Reconstructed	3
Houses at which Drains were Cleansed, Ventilated, Trapped or Repaired	15
Number of Water Tests made in course of work under the two previous headings	6
Urinals Cleansed and Repaired	1
New Urinals Built	—
Offensive Accumulations Removed	9
Infected Houses Fumigated and Cleansed	55
New Water closets Built	—
New Stables Built	—
Houses Demolished	—
Drinking Water Cisterns Removed from under Floors of Bedrooms	2
Inspection Chambers provided to Old Drains	5
Bedrooms Ventilated	2
Schools Cleansed	1

I have the honour to remain, Gentlemen,

Your obedient Servant,

WILLIAM GEORGE POWELL,

(Assoc. and Cert. Sanitary Institute)

Inspector of Nuisances.

TABLE I.

Year.	Population estimated to Middle of each year.	Births.		Deaths under One Year of Age.		Deaths at all Ages.		Total Deaths in Public Institutions in the District.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond District.	Net Deaths at all Ages belonging to the District.	
		Number.	Rate.*	Number	Rate per 1,000 Births registered.	Number	Rate.*				Number	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1900	7858	106	17.9	10	94	45	7.6	—	—	11	56	9.5
1901	7429	166	22.3	15	90	67	9.0	—	—	9	76	10.2
1902	7545	157	20.8	20	127	75	9.9	—	—	10	85	11.2
1903	7640	190	24.8	19	100	71	9.2	—	—	9	80	10.4
Averages for years 1900-1903.												
	7618	154	21.4	16	102	64	8.9	—	—	9	74	10.3
1904	7736	181	23.3	15	82	60	7.7	—	—	12	72	9.3

* Rates calculated per 1,000 of estimated population.

Area of District in Acres (Exclusive of Area covered by water) } 2,791. Total Population at all Ages 7,429
 Institutions outside the District receiving sick and infirm persons from the District—Bromley Union (in the Bromley Rural District). } 1,403
 Bromley and Beckenham Joint Hospital (in the Bromley Urban District.) } 5
 At Census of 1901.

TABLE II.

Year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
1900	7858	106	56	10
1901	7429	166	76	15
1902	7545	157	85	20
1903	7640	190	80	19
Averages of years 1900 to 1903 ...	7618	154	74	16
1904	7736	181	72	15

TABLE III.

Cases of Infectious Disease notified during the Year 1904.

Notifiable Diseases.	Cases notified in whole District.								No. of Cases removed to Hospital.
	At all Ages.	At Ages—Years.							
		Under 1.	1 to 5.	5 to 15	15 to 25.	25 to 65.	65 and upwards		
Small-pox ... ..	...	...	...	...	...	...	...	...
Cholera ... ..	...	...	...	...	...	...	...	...
Diphtheria	6	1	1	4	...	...	...	2
Membranous croup ... ..	...	...	...	...	...	...	...	...
Erysipelas	10	1	1	1	1	5	1	...	
Scarlet Fever	57	1	17	34	3	2	...	52	
Typhus Fever... ..	...	...	...	...	...	...	...	...
Enteric Fever... ..	2	...	...	...	2	...	...	...
Relapsing Fever ... ..	..	...	...	...	...	...	...	...
Continued Fever ... ..	...	...	...	...	...	...	...	...
Puerperal Fever ... ..	...	...	...	...	...	...	...	...
Plague ... ..	...	...	...	...	...	...	...	...
Totals	75	3	19	39	6	7	1	54	

Isolation Hospital—Bromley and Beckenham Joint.

TABLE IV.

Causes of, and Ages at, Deaths during Year 1904.

Causes of Death.	Deaths in or belonging to whole District at subjoined Ages.							Total Deaths in Public Institutions in District.
	All Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	
Small-pox ... ..	...	...	...	...	...	...	...	...
Measles ... ..	...	...	...	...	...	...	...	...
Scarlet Fever ... ..	...	...	...	...	...	...	...	...
Typhus ... ..	...	...	...	...	...	...	...	...
Epidemic influenza ... ..	...	...	...	...	...	...	...	...
Whooping-cough ... ..	...	...	...	...	...	...	...	...
Diphtheria, Membranous croup ... ..	...	...	...	...	...	...	...	...
Croup	1	...	...	...	I	...	...	...
Enteric Fever ... ..	...	...	...	...	...	...	...	...
Asiatic Cholera	2	2	...	...	...	...	...	...
Diarrhœa, Dysentery	I	I	...	...	...	...	...	...
Epidemic or Zymotic Enteritis	4	I	2	...	I	...	...	...
Enteritis ... ..	...	...	...	...	...	...	...	...
Other continued Fevers ... ..	...	...	...	...	...	...	...	...
Erysipelas ... ..	...	...	...	...	...	...	...	...
Puerperal fever ... ..	...	...	...	...	...	...	...	...
Other septic diseases	I	...	...	...	...	I	...	...
Intermittent Fever and Malarial Cachexia ... ..	...	...	...	...	...	...	...	...
Tuberculosis of Meninges	2	2	...	...	...	...	...	...
Tuberculosis of Lungs	5	...	...	...	...	5	...	...
Other forms of Tuberculosis ... ..	...	...	...	...	...	...	...	...
Alcoholism ... ..	...	...	...	...	...	...	...	...
Cancer	4	...	...	...	...	2	2	...
Premature Birth	I	I	...	...	...	...	...	...
Developmental Diseases	6	4	2	...	...	...	...	...
Old Age	10	...	...	...	...	...	10	...
Meningitis ... ..	...	...	...	...	...	...	...	...
Inflammation and Softening of Brain ... ..	...	...	...	...	...	...	...	...
Organic Diseases of Heart	7	...	...	...	I	3	3	...
Acute Bronchitis ... ..	...	...	...	...	...	...	...	...
Chronic Bronchitis	3	...	...	...	...	...	3	...
Lobar (Croupous) Pneumonia ... ..	...	...	...	...	...	...	...	...
Lobular (Broncho-) Pneumonia	4	2	I	...	...	...	I	...
Diseases of Stomach ... ..	...	...	...	...	...	...	...	...
Obstruction of Intestines	I	...	...	...	...	...	I	...
Cirrhosis of Liver	I	...	...	...	...	I	...	...
Nephritis & Bright's Disease	I	...	...	...	...	I	...	...
Tumours & Other Affections of Female Genital Organs ... ..	...	...	...	...	...	...	...	...
Accidents and Diseases of parturition ... ..	...	...	...	...	...	...	...	...
Deaths by Accident or Negligence	2	...	...	...	I	I	...	...
Deaths by Suicide ... ..	...	...	...	...	...	...	...	...
Deaths from ill-defined causes ... ..	...	...	...	...	...	...	...	...
All other causes	16	2	...	I	...	8	5	...
All causes	72	15	5	I	4	22	25	—

In recording the facts under the various headings of Tables 1, 2, 3, and 4, attention has been given to the notes on the Form of Tables supplied by the Local Government Board.—J. S. TEW,
March 20th, 1905. Medical Officer of Health.

Factories, Workshops, Laundries, Workplaces and Homework.

1.—INSPECTION.

Including Inspections made by Sanitary Inspector or Inspector of Nuisances.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)	6	Letters only sent.	Nil.
Workshops (including Workshop Laundries)	95		
Workplaces			
Homeworkers' Premises... ..			
Total	101		

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H. M. Inspector	
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness	6	6	—	—
Want of Ventilation				
Overcrowding	1	1	—	—
Want of drainage of floors				
Other nuisances				
Sanitary Accommodations { insufficient				
unsuitable or defective				
not separate for sexes.				
<i>Offences under the Factory & Workshop Act :—</i>				
Illegal occupation of underground bakehouse (S. 101)				
Breach of special sanitary requirements for bakehouses (SS. 97 to 100)				
Failure as regard list of outworkers (S. 107)				
Giving out work to be done in premises which are unwholesome (S. 108)				
infected (S. 110)				
Allowing wearing apparel to be made in premises infected by scarlet fever or small-pox (S. 109)				
Other offences				
Total	7	7		

3.—OTHER MATTERS.

Class.	Number.	
Matters notified to H.M. Inspectors of Factories :—		
Failure to affix Abstract of the Factory & Workshop Act (S. 133)	Nil.	
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act (S. 5)	Notified by H.M. Inspector	Nil
Other	Reports (of action taken) sent to H.M. Inspectors.	Nil
Underground Bakehouses (S. 101) :—		
In use during 1903	...	Nil.
Certificates granted { in 1903...	...	Nil.
{ in 1904...	...	Nil.
In use at end of 1904	...	Nil.
Homework : <i>Lists of Outworkers</i> —(S. 107)	Number of Lists Outworkers	
Lists received	Nil.	
Address of outworkers { forwarded to other Authorities ...	Nil.	
{ received from other Authorities ...	Nil.	
<i>Homework in unwholesome or infected premises :</i>	Wearing Apparel. Other.	
Notices prohibiting homework in unwholesome premises (S. 108)		
Cases of infectious disease notified in homeworkers' premises ...	Nil.	Nil.
Orders prohibiting homework in infected Premises (S. 110) ...		
Workshops on the Register (S. 131) at the end of 1904.		
Laundries	2	
Bakers	7	
Others	31	
Total number of Workshops on Register	40	

